

Reem Glasco, LPC-S, Licensed Psychotherapist, Private practice
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512-965-5105

NPI # 1003159922

EIN # 85-2097457

L# 66562

Codes 90837- Individual therapy session, I only accept BCBS-PPO and /or private pay fee is \$165 per min session

I only do on-line telehealth (02 /10) sessions,
Location Texas

I only do equine therapy in person, private pay only.
Fee \$210 for 1.15 min session

Good Faith estimate (GFE) for services:1/1/22 to 12/31/22
Please complete/keep a copy and send me a copy

Client:

Name

Address

Phone

Email

DOB

Diagnosis: Z65.9 (Problem related to unspecified psychosocial circumstances)

The following statement is a Good Faith Estimate (GFE) rendered for services to be rendered in the next calendar year in accordance with the No Surprise Act.. All services are the financial responsibility of the client. **This is NOT a bill.**

Under Section 2799B-6 of the Public Health Service Act, health care providers and health care facilities are required to provide a good faith estimate of expected charges for items and services to individuals who are not enrolled in a plan or coverage or a Federal health care program, or not seeking to file a claim with their plan or coverage both orally and in writing, upon request or at the time of scheduling health care items and services.

Description:

90834 Individual therapy for 50 min session:

Place of service: 02/10 Telehealth

Provider and billing is by above therapist

Fee for service: ___ 165 _____. per 50 min session on date ___ above _____

Duration: 52 weekly estimated sessions =Total estimate for the year is ____ \$8580 weekly

Or _Duration: 26 Bi-weekly estimate sessions =total estimate is \$4290 _____

. Your therapy needs may vary throughout the year. You may need less or more frequent sessions, which would impact this estimate accordingly. You may also discontinue therapy at any time. The estimated costs are valid for 12 months from the date of the Good Faith Estimate. This is NOT a contract; it is simply an estimate of your treatment costs for the next year if you were to attend once weekly sessions, not including holidays, breaks, or early termination. Additional charges may apply for additional sessions, report/letter writing, and no shows, which are all contracted at the fee for service per therapeutic hour (50 minutes).